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ABSTRACT

This document describes the Non-Technical Medical Care (NTMC) program, a personal care service offered by the Oklahoma Department of Human Services to eligible persons in their own homes. These NTMC program goals are listed: to provide personal care services to frail elderly and disabled persons, allowing them to remain in their homes; and to provide respite to families who choose to be primary caregivers for a disabled family member. It is noted that NTMC providers can provide aid to eligible persons in such areas as bathing and personal care; meal preparation; giving medications; help with exercise; help with non-skilled treatments ordered by physicians; and help with laundry and housekeeping. It is emphasized that NTMC providers are not expected to care for other family members or for animals, and they are not expected to provide transportation for the client, although they can run errands for clients. This booklet explains eligibility for the NTMC program and how to apply. It describes how clients are referred, who provides care, and how long NTMC services can be received. The relationship between the client, the Department of Human Services, and the NTMC provider is discussed. Ways to become an NTMC provider are described and payment for services of the provider is explained. (NB)

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Aging

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NON-TECHNICAL MEDICAL CARE: AN IN-HOME CARE PROGRAM

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The Non-Technical Medical Care program

The Non-Technical Medical Care program is a personal care service offered to eligible persons in their own homes. Personal care services are those activities which help a person to meet daily living needs, such as hygiene, grooming, adequate nutrition, mobility, safety and cleanliness of the home.

Since 1970, thousands of Oklahomans from a few months of age to more than 100 years old have received services in their own homes through the NTMC program. This program helps families care for loved ones at home for a longer period of time. It also helps many elderly persons avoid premature institutional care.

What are the goals?

The goals of the NTMC program are:

1. To provide personal care services to frail elderly and disabled persons, allowing them to remain in their own homes for as long as possible.
2. To provide respite to families who choose to be primary caregivers for a disabled family member, thus strengthening the family and improving the quality of life for its members.

What services are offered?

It is often beneficial for a person with limited physical or mental ability to remain in the familiar surroundings of his or her own home when a qualified person is there to help meet his or her essential daily needs, such as:

- ✓ help with bathing, toileting and grooming.
- ✓ preparing balanced meals.
- ✓ giving prescribed medications.
- ✓ help with exercises to improve mobility.

- ✓ help with special non-skilled treatments ordered by the physician.
- ✓ having laundry and light housekeeping done to ensure cleanliness and safety of the home.

Program limitations

The NTMC providers are not expected to care for other members of the family if they have not been approved to receive NTMC services. They are not expected to care for animals, perform work outside of the home or help with transportation for the client. The provider may carry out errands for the client. An example of such errands might include shopping for groceries and seeing that bills are paid. NTMC providers are not paid for mileage except when the provider transports the client outside of the county of residence for medical treatment.

Who is eligible to receive NTMC?

NTMC services may be available to any person who receives medical assistance or DHS state supplemental payments to the aged, blind and disabled. The applicant must meet certain financial and medical requirements to be eligible.

NTMC is available in every county in the state of Oklahoma. Application for NTMC is made at the local DHS county office. If a person is unable to make the request, a family member can make the request. If the person is unable to come to the DHS office, a social worker will make a home visit to take the application. A nurse will also make a home visit to gather information regarding the person's health needs.

The process of determining medical eligibility for services usually takes two to three weeks. The determination of financial eligibility may take longer.

How are clients referred?

Clients are referred from hospitals, adult day care centers, physicians' offices and nursing homes. Many times the client or a family member makes the request for in-home assistance.

Who gives the care?

The care is given by a person who is selected by the client, has received training in caring for persons in their home, is at least 18 years old and is not a family member of the client.

Some of these persons have professional education, and others may not have completed high school. An important quality for caregivers is the willingness to help someone in need.

The training and instruction provided by the NTMC nursing staff help a person to become confident about his or her ability to give care. People who have not completed a home care or nurse's aide course at a hospital or vocational-technical school will be required to complete a course offered by the NTMC nursing staff.

A person is eligible to begin work for a client only after he or she has been determined qualified according to DHS policy and has signed a contract and received orientation by the NTMC nursing staff.

The NTMC nursing staff are DHS employees. The nurses are responsible for the management of the in-home care the client receives.

The registered nurse assesses the client's in-home care needs; using the physician's orders and the client's input, the registered nurse develops a care plan. This plan of care is the guide the NTMC provider uses while giving care in the client's home.

The registered nurse makes a home visit at least

every 60 days to reassess the client's needs, review or revise the plan of care and provide any additional instruction the NTMC provider and client may need.

How long can NTMC be received?

NTMC services may be received as long as the client needs the care and continues to meet financial and medical eligibility requirements.

If the client decides that he or she no longer needs the care, the social worker and nurse should be notified. When the client's health improves to an extent not requiring personal care assistance, the nurse may discuss this with the client and offer another level of care.

What is the relationship between the client, DHS and the provider?

The client is the employer of the NTMC provider. The provider is selected by the client and can be fired by the client if the provider is not performing satisfactorily. The client determines the hours of the day that the NTMC provider works. However, the provider must be available to meet with the nurse at each home visit unless other arrangements are made.

Clients must notify the DHS staff when they have to change providers. This is to make sure that qualified persons are referred to the client for interview and selection. After a client has selected a provider, orientation will be scheduled at the local DHS county office. *This must occur before a provider can begin work for a client.*

DHS provides staff to instruct the provider in the care to be given to the client and to make sure that the client is receiving services according to the plan of care. We help locate a provider if necessary, and make

regular visits to the home at least every 60 days to assess the client's well being and care needs.

The NTMC nurse determines the number of days of service the client is to receive. This depends upon the needs of the client and other available help.

The NTMC provider signs a contract each year, agreeing to abide by certain conditions as a DHS Medicaid vendor.

DHS can terminate an NTMC provider if he or she is not delivering the services to the client according to the plan of care that was established by the nurse. Providers may also be terminated by DHS for other reasons which are violations of the contract or that may pose a threat to the health or safety of the client.

Becoming an NTMC provider

All DHS county offices have NTMC provider application form NTMC-15, which may be completed by prospective NTMC providers. Qualified persons who have completed required training are then referred to NTMC clients for interview and selection.

A person who works for DHS cannot be a provider for an NTMC client. A family member of a NTMC client cannot be paid for giving care.

Currently licensed registered nurses or licensed practical nurses are not required to take additional training; however, they must complete an NTMC provider application to work in the program.

Payment for services of the provider

The NTMC provider is not an employee of the Department of Human Services. Providers are Medicaid vendors.

The fee the NTMC provider receives is paid by DHS

on behalf of the client. Social Security taxes (FICA) are also withheld from these payments. The NTMC provider is responsible for any state or federal withholding taxes that may be due.

The provider is expected to give three hours of in-home care each day to one eligible client in the home and five hours of care for two eligible clients in the home. The provider is paid a daily rate for in-home services. The provider cannot work more than 40 hours each week.

The Medicaid payments to the NTMC provider are only for services outlined in the client's plan of care developed by the NTMC nurse. If additional hours of service are needed, a family may consider direct payment to the provider for more than three hours of work per day.

When the client lives with others in the home, the services are provided only for the client. Providers may not select another caregiver to work in their place if they are unable to work on a scheduled day. All caregivers must be qualified Medicaid vendors.

NTMC providers are paid monthly. The provider submits a claim for payment to the local DHS office on the last working day of the month. The claims are then forwarded to Oklahoma City for processing. If the claim is free of errors, payment can be expected by the middle of the following month.

NTMC NURSE

TELEPHONE NUMBER TO DHS OFFICE

*YOU CAN COUNT
ON US!*



This publication does not contain specific information on eligibility. Contact the DHS office in the county where you live to find out if you qualify for help.

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(Replaces 86-14 and 86-159)

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